

SOUTHPOINTE HEALTHCARE CENTER
4500 WEST LOOMIS ROAD

GREENFIELD 53220 Phone:(414) 325-5300

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/05): 174

Total Licensed Bed Capacity (12/31/05): 174

Number of Residents on 12/31/05: 170

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

166

Age, Gender, and Primary Diagnosis of Residents (12/31/05)				Length of Stay (12/31/05)	
Primary Diagnosis	%	Age Groups	%		%
Developmental Disabilities	0.0	Under 65	0.0	Less Than 1 Year	54.1
Mental Illness (Org./Psy)	7.1	65 - 74	9.4	1 - 4 Years	31.2
Mental Illness (Other)	1.8	75 - 84	38.8	More Than 4 Years	14.7
Alcohol & Other Drug Abuse	0.0	85 - 94	44.1		-----
Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.6		100.0
Cancer	1.8		-----	Full-Time Equivalent	
Fractures	28.2		100.0	Nursing Staff per 100 Residents	
Cardiovascular	19.4	65 & Over	100.0	(12/31/05)	
Cerebrovascular	8.2		-----		
Diabetes	0.6	Gender	%	RNs	12.1
Respiratory	0.6		-----	LPNs	9.9
Other Medical Conditions	32.4	Male	25.3	Nursing Assistants,	
	-----	Female	74.7	Aides, & Orderlies	
	100.0		-----		35.8
			100.0		

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care						
		Per Diem				Per Diem				Per Diem				Per Diem				Per Diem		Total	%
Level of Care	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	Resi- dents	Of All	
Int. Skilled Care	0	0.0	0	4	5.3	151	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	2.4	
Skilled Care	52	100.0	358	71	93.4	130	6	100.0	130	31	100.0	230	3	100.0	130	2	100.0	351	165	97.1	
Intermediate	---	---	---	1	1.3	108	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.6	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	52	100.0		76	100.0		6	100.0		31	100.0		3	100.0		2	100.0		170	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	0.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	4.5	Bathing	6.5	77.1	16.5	170
Other Nursing Homes	0.5	Dressing	7.6	75.3	17.1	170
Acute Care Hospitals	94.2	Transferring	10.0	71.2	18.8	170
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	10.0	71.8	18.2	170
Rehabilitation Hospitals	0.0	Eating	72.9	18.8	8.2	170
Other Locations	0.0	*****				
Total Number of Admissions	915	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	5.3		Receiving Respiratory Care	12.4
Private Home/No Home Health	42.2	Occ/Freq. Incontinent of Bladder	75.9		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	11.2	Occ/Freq. Incontinent of Bowel	72.9		Receiving Suctioning	0.6
Other Nursing Homes	1.3				Receiving Ostomy Care	2.4
Acute Care Hospitals	27.7	Mobility			Receiving Tube Feeding	3.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	32.9
Rehabilitation Hospitals	0.0					
Other Locations	0.1	Skin Care			Other Resident Characteristics	
Deaths	8.7	With Pressure Sores	7.6		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	2.4		Medications	
(Including Deaths)	909				Receiving Psychoactive Drugs	37.6

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.4	85.1	1.12	84.6	1.13	86.5	1.10	88.1	1.08
Current Residents from In-County	93.5	82.7	1.13	87.4	1.07	84.9	1.10	77.6	1.21
Admissions from In-County, Still Residing	9.6	15.8	0.61	17.0	0.57	17.5	0.55	18.1	0.53
Admissions/Average Daily Census	551.2	247.5	2.23	221.6	2.49	200.9	2.74	162.3	3.40
Discharges/Average Daily Census	547.6	250.7	2.18	225.9	2.42	204.0	2.68	165.1	3.32
Discharges To Private Residence/Average Daily Census	292.8	109.5	2.67	100.1	2.92	86.7	3.38	74.8	3.91
Residents Receiving Skilled Care	99.4	96.3	1.03	97.0	1.02	96.9	1.03	92.1	1.08
Residents Aged 65 and Older	100	84.6	1.18	90.1	1.11	90.9	1.10	88.4	1.13
Title 19 (Medicaid) Funded Residents	44.7	59.3	0.75	55.5	0.80	55.0	0.81	65.3	0.68
Private Pay Funded Residents	18.2	13.3	1.37	21.9	0.83	22.5	0.81	20.2	0.90
Developmentally Disabled Residents	0.0	1.9	0.00	1.2	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	8.8	29.4	0.30	28.6	0.31	31.0	0.28	32.9	0.27
General Medical Service Residents	32.4	26.5	1.22	30.3	1.07	26.5	1.22	22.8	1.42
Impaired ADL (Mean)	47.3	53.7	0.88	52.9	0.89	52.3	0.90	49.2	0.96
Psychological Problems	37.6	53.4	0.70	56.3	0.67	58.3	0.65	58.5	0.64
Nursing Care Required (Mean)	7.7	7.7	1.01	6.9	1.12	7.3	1.06	7.4	1.04